

## TOWN OF STERLING ANIMAL CONTROL 135 Leominster Road Sterling, Ma 01564 978-422-7331

## ANIMAL ADOPTION CONTRACT NOTICE TO NEW GUARDIANS OF ANIMALS

I/We,		, Hereby Adopt	from the Town of Sterling	
	(Applicant)	(Description/name of m	y new pet)	
and A	gree to Abide by	Certain Principles of Responsible Animal Owners	hip, Including:	
•	Protect:	<b>Protect</b> : "To Protect People from Animals and Animals from People;"		
•	Control: To keep my/new animal in my possession and control at all times;		ontrol at all times;	
•	Abide: To abide by the applicable Massachusetts General Laws, the bylaws of the Town Of Sterling or the applicable bylaws/ordinances of my home municipality, and any rules adopted or enacted therein;		•	
•	Care: To care for my/our new pet humanely;			
•	• <b>Reduce:</b> To have my/our new pet spayed/neutered to help reduce the number of unwanted/abandoned animals in shelter;		p reduce the number	
		There is no 'trial' adoption period. However, within the first sixty (60) days, for any reason, should I/we wish to relinquish ownership of the animal, I/we may do so <i>only</i> to the Town of Sterling.		
	My/our initials next to each requirement below serves as acknowledgement that I/we have read and agreed to each Term for adoption.  I/we are at least eighteen (18) years of age.			
	<ul> <li>I/we understand that this adoption of an abandoned/surrendered animal, and not the purchase thereof.</li> <li>Therefore, any donation made to the Town of Sterling is voluntary and not refundable <i>for any reason</i>.</li> <li>I/we adopt this animal for my/ourselves(s) and my/our family and not as a gift for compensation for Anyone residing outside the home address listed below.</li> </ul>			
	food, w	/are prepared for and assume all responsibility for ater, exercise, veterinary care and human treatmer pership, including financial, emotional.	•	

1	I/we agree to take this new pet to a veterinarian for a check-up within ten (10) days of adoption, and to visit my/our veterinarian for all medical treatments and vaccinations that are required.
	If this new pet is not yet spayed/neutered, I/we agree to have this new pet spayed/neutered within sixty (60) days of the adoption, or within sixty (60) days of this pet reaching six (6) months of age.
	I/we will provide the Town of Sterling with a thirty (\$30.00) deposit, said deposit will be refunded to me/us once I/we provide the Town of Sterling with proof of spay/neuter.
	I/we will treat my/our new pet as a member of the family and will not use him/her for breeding, experimental or criminal purposes.
	All family members support the adoption of this pet. I/we have considered the compatibility of this specific pet with other animals that may already be living in the home. To the best of my/our knowledge, no family members have medically uncontrollable allergies to this type of pet.
	I/we agree to provide the Town of Sterling with either:  proof of home ownership, or  proof in either a rental or lease agreement that the apartment/condominium in which I/we reside allows pets like the one that I/we are now adopting. I/we also agree to provide contact information for either a landlord or an association, whichever controls my/our residence and authorize the Town of Sterling to contact said person/association to verify pet ownership rules.
	I/we will abide all pet licensing, leash law and vaccination laws/bylaws and/or regulations.
	I/we understand that failure to comply with <i>any</i> of these requirements may result in the confiscation of this pet. I/we waive any objection to the Town of Sterling to contact me/us to insure compliance with these regulations.
	I/we indemnify the Town of Sterling and its employees for the present and/or future health / temperament of this pet. I/we also indemnify the Town of Sterling and its employees from any damage, accident or injury caused either directly or indirectly by this pet towards other animals, people or property.
Signature(s):	
Print Name(s):	
Address:	
Phone Number	